### Case 18-08750 Doc 1 Filed 03/26/18 Entered 03/26/18 18:29:01 Desc Main Document Page 1 of 40

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Amanda	
	your government-issued picture identification (for	First name	First name
	example, your driver's	Jo	
	license or passport).	Middle name	Middle name
	Bring your picture	Carico	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4359	

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Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		485 LaSalle Drive Somonauk, IL 60552 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		·	, ,			
		La Salle County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Why you are choosing     this district to file for		Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Debtor 1 Amanda Jo Carico

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Deb	otor 1 Amanda Jo Carico	)			Case number (if known)	
Par	t 2: Tell the Court About	our Bankruptcy (	Case			
7.	The chapter of the Bankruptcy Code you are			each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Ba e box.	nkruptcy
	choosing to file under	Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		☐ Chapter 13				
8.	How you will pay the fee	about how	you may pay. Typica ur attorney is submitt	ally, if you are paying the fee yo	k with the clerk's office in your local court for nourself, you may pay with cash, cashier's check alf, your attorney may pay with a credit card or	k, or money
			oay the fee in install Fee in Installments (0		on, sign and attach the Application for Individua	als to Pay
		☐ I request the but is not reapplies to y	hat my fee be waive equired to, waive you our family size and y	ed (You may request this option if the contract of the contrac	n only if you are filing for Chapter 7. By law, a jour income is less than 150% of the official pown installments). If you choose this option, you rotal Form 103B) and file it with your petition.	erty line that
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.		14/6	0	
		Distric	<del></del>	<del></del>		
		Distric Distric	<del></del>	When When	Case number  Case number	
				,,,,,,		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.				
		Debtor	r		Relationship to you	
		Distric	;t	When	Case number, if known	
		Debtor	r		Relationship to you	
		Distric	:t	When	Case number, if known	
11.	Do you rent your	■ No. Go to	o line 12.			
	residence?		vour landlord obtaine	ed an eviction judament agains	st you and do you want to stay in your residence	e?
			No. Go to line 12.	, , ,	, , , , , ,	
				I Statement About an Eviction	Judgment Against You (Form 101A) and file it	with this

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Debtor 1 Amanda Jo Carico				Case number (if known)	
Par	t 3: Report About Any	Businesses	You Own as a Sole Proprie	etor	
12.	Are you a sole proprieto of any full- or part-time business?	or 🗆 No.	Go to Part 4.		
		Yes.	Name and location of bu	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than on	e	Couture Tan, Inc.  Name of business, if any c/o Amanda Carico 485 LaSalle Drive Somonauk, IL 60552		
	sole proprietorship, use a separate sheet and attack		Number, Street, City, Sta	ate & ZIP Code	
	it to this petition.		Check the appropriate be	ox to describe your business:	
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))	
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				I Estate (as defined in 11 U.S.C. § 101(51B))	
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))				defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
			None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and a you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, s operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).			
	For a definition of <i>small</i>	■ No.	I am not filing under Cha	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own	or Have An	v Hazardous Property or Ar	ny Property That Needs Immediate Attention	
	Do you own or have any	y <b>I</b> No			
	property that poses or i alleged to pose a threat				
	of imminent and identifiable hazard to public health or safety?		What is the hazard?		
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed or a building that needs urgent repairs?		Where is the property?	Number Street City State 9 7in Code	
				Number, Street, City, State & Zip Code	

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Debtor 1 Case number (if known) Amanda Jo Carico Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit ☐ I received a briefing from an approved credit counseling agency within the 180 days before I briefing about credit counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. The law requires that you Attach a copy of the certificate and the payment receive a briefing about Attach a copy of the certificate and the payment plan, if plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. You must truthfully check I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I one of the following filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do a certificate of completion. of completion. so, you are not eligible to file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you filed for bankruptcy. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. П My physical disability causes me to be My physical disability causes me to be unable to unable to participate in a briefing in person, participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to by phone, or through the internet, even after I reasonably tried to do so. do so. Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a military military combat zone. combat zone. If you believe you are not required to receive a If you believe you are not required to receive a briefing briefing about credit counseling, you must file a about credit counseling, you must file a motion for waiver

motion for waiver credit counseling with the court.

of credit counseling with the court.

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Debtor 1 Amanda Jo Carico				Case number (if i	Case number (if known)		
Part	6: Answer These Questi	ons for R	eporting Purposes				
16.	What kind of debts do you have?	16a.			in 11 U.S.C. § 101(8) as "incurred by an		
			No. Go to line 16b.				
			☐ Yes. Go to line 17.				
		16b.					
			☐ No. Go to line 16c.				
			Yes. Go to line 17.				
		16c.	State the type of debts you owe the	at are not consumer debts or business de	ebts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and	indivídual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.  16b.  Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.  16c.  State the type of debts you owe that are not consumer debts or business debts  Yes.  I am not filing under Chapter 7. Go to line 18.  Yes. are paid that funds will be available to distribute to unsecured creditors? initiation to unsecured differs?  I many Creditors do estimate that you litinos to unsecured differs?  I many Creditors do estimate that you litinos to unsecured differs?  I nound follow the formation to unsecured litinos?  I nound follow the follo					
	are paid that funds will		No	П 1 000-5 000			
	Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  How many Creditors do you estimate that you owe?  How much do you estimate your assets to be worth?		Yes				
18.	How many Creditors do	1-49					
				10,001-23,000	LI More man 100,000		
19.	How much do you	□ \$0 - \$	50,000		□ \$500,000,001 - \$1 billion		
			. ,				
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 million			
	to be?				y is excluded and administrative expenses    25,001-50,000		
			. ,				
Part	:7: Sign Below						
For	you	I have ex	camined this petition, and I declare u	under penalty of perjury that the information	on provided is true and correct.		
document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 1							
			d in this petition.				
		/s/ Ama	nda Jo Carico	Cionativo of Dalatic C			
				Signature of Debtor 2			
		Executed		Executed on			
			MM / DD / YYYY	MM / Di	D / YYYY		

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Debtor 1 Amanda Jo Caric	0	Cas	Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Uni	ted States Code, and have	e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applie schedules filed with the petition is incorrect.	s, certify that I have no know	wledge after an inquiry that the information in the			
	/s/ John S. Biallas	Date	March 26, 2018			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	John S. Biallas					
	Printed name					
	John S. Biallas, Attorney At Law					
	Firm name					
	3N918 Sunrise lane					
	St. Charles, IL 60174					
	Number, Street, City, State & ZIP Code					
	Contact phone <b>630-513-7878</b>	Email address	jsb70@comcast.net			
	00203890					
	Bar number & State		<del></del>			

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Fill in this information to identify your case:						
Debtor 1	Amanda Jo Caric	0				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number _					Check if this is an	
					amended filing	

## Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

	rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	su scrieuu	nes after you me
ar	t 1: Summarize Your Assets		
		Your a	ssets of what you own
	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	200,000.0
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	33,479.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$	233,479.0
ar	t 2: Summarize Your Liabilities		
			<b>abilities</b> It you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	185,200.5
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	176,202.4
	Your total liabilities	\$	361,403.01
ar	t 3: Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,302.7
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,608.7
ar	t 4: Answer These Questions for Administrative and Statistical Records		
	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and s	ubmit this form to
)ff	icial Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information		page 1 of 2

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Deb	tor 1	Amanda Jo Carico	Case number (if known)	
		n the Statement of Your Current Monthly Income: Co -1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1	py your total current monthly income from Official Form ine 14.	\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total</b> . Add lines 9a through 9f.	\$	0.00

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Fill in this in	formation to identify your	case and this	filing	j:			
Debtor 1	Amanda Jo Cario	CO Middle Na	ama	Last Name			
Debtor 2							
(Spouse, if filing)	First Name	Middle N		Last Name			
United States	Bankruptcy Court for the:	NORTHERN	DIST	RICT OF ILLINOIS			
Case number	r						Check if this is an amended filing
	Form 106A/B						
Sched	ule A/B: Prop	erty					12/15
think it fits bes information. If Answer every o	t. Be as complete and accura more space is needed, attach question.	ate as possible. a separate she	If two et to th	only once. If an asset fits in more than on married people are filing together, both are his form. On the top of any additional page Estate You Own or Have an Interest In	equally resp	onsible for sup	plying correct
☐ No. Go to	, , ,	e interest in any	/ resid	ence, building, land, or similar property?			
1.1			What	is the property? Check all that apply			
	485 LaSalle Drive Street address, if available, or other description		Duplex or m	Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount	Do not deduct secured claims or exemptior the amount of any secured claims on Schei Creditors Who Have Claims Secured by Proceedings of the Creditors Who Have Claims Secured by Proceedings of the Creditors Who Have Claims	
Somor		552-0000 ZIP Code		Manufactured or mobile home Land Investment property	Current va entire prop		Current value of the portion you own? \$200,000.00
	•		☐ Timeshare ☐ Other  Who has an interest in the property? Check one	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties a life estate), if known.			
La Sall	0			Debtor 1 only	Tenancy	by the Enti	ireties
County	<b>.</b>		☐ ☐ Other	Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another r information you wish to add about this ite	(see ins	structions)	nunity property
				erty identification number: idence of the Debtor			
				your entries from Part 1, including any r here			\$200,000.00
Part 2: Desc	ribe Your Vehicles						

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Deb	tor 1 Amanda Jo Carico	Case number (if known)		
3. <b>C</b>	ars, vans, trucks, tractors, sport utility ve	hicles, motorcycles		
	No			
	Yes			
3.1	· · · <u> </u>	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model: Cruze	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
	Year: 2014 Approximate mileage: 81000	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 81000 Other information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
	Location: 485 LaSalle Drive,	At least one of the debtors and another		
	Somonauk IL 60552	☐ Check if this is community property (see instructions)	\$7,529.00	\$7,529.00
3.2	Make: Chevy	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model: HD2500	Debtor 1 only		aims Secured by Property.
	Year: <b>2016</b>	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 36000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	Location: 485 LaSalle Drive, Somonauk IL 60552	☐ Check if this is community property	\$25,000.00	\$25,000.00
		(see instructions)		
.p		rn for all of your entries from Part 2, including that number here		\$32,529.00
Do	you own or have any legal or equitable in	terest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions
<i>E</i>	ousehold goods and furnishings Examples: Major appliances, furniture, linens No Yes. Describe	, china, kitchenware		claims or exemptions.
		iture and misc. Household goods aSalle Drive, Somonauk IL 60552		\$750.00
E	lectronics Examples: Televisions and radios; audio, vide including cell phones, cameras, m ■ No ■ Yes. Describe	eo, stereo, and digital equipment; computers, pr nedia players, games	inters, scanners; music collec	tions; electronic devices
E	ollectibles of value Examples: Antiques and figurines; paintings, other collections, memorabilia, co	prints, or other artwork; books, pictures, or othe llectibles	r art objects; stamp, coin, or b	aseball card collections;
_	Yes. Describe			

Official Form 106A/B Schedule A/B: Property page 2

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D	ebtor 1	Amanda Jo Car	rico Case nu	number (if known)	
9.	Exampl	ent for sports and hes: Sports, photograp musical instrume	phic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs	ıbs, skis; canoes and kayaks; carpentry tools;	
	■ No □ Yes.	Describe			
10.	. Firearr Examp ■ No		notguns, ammunition, and related equipment		
	☐ Yes.	Describe			
11.	□ No	oles: Everyday clothe	es, furs, leather coats, designer wear, shoes, accessories		
	■ Yes.	Describe			
			othing of an adult female ocation: 485 LaSalle Drive, Somonauk IL 60552	\$200.0	0
12.	■ No		ry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, wa	watches, gems, gold, silver	
13.		rm animals oles: Dogs, cats, bird	s, horses		
		Describe			
14.	■ No	her personal and he	ousehold items you did not already list, including any health aids you ation	ou did not list	
15			Il of your entries from Part 3, including any entries for pages you have the pages you have the second seco	ave attached \$950.00	
		scribe Your Financial			
D	o you ov	vn or have any lega	l or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.	
16.	■ No		e in your wallet, in your home, in a safe deposit box, and on hand when you	you file your petition	
17.	Examp		gs, or other financial accounts; certificates of deposit; shares in credit unio ou have multiple accounts with the same institution, list each.	nions, brokerage houses, and other similar	
	■ No □ Yes		Institution name:		
18.	. <b>Bonds</b> Examp	, mutual funds, or poles: Bond funds, inve	oublicly traded stocks estment accounts with brokerage firms, money market accounts		
			Institution or issuer name:		
19.	-	ublicly traded stock enture	and interests in incorporated and unincorporated businesses, include	uding an interest in an LLC, partnership, an	ıd
		•	ation about them		
Off	ficial Ear	m 106Δ/R	Schedule A/R: Property	nane	ຸລ

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D	ebtor 1	Amanda Jo Car	rico		Case number (i	f known)	
			Name of entity:		% of ownershi	p:	
			Couture Tan, Inc. Location: 485 LaSalle	Drive, Somonauk IL 60552	100	_ %	Unknown
20	Negotia	able instruments incl	lude personal checks, cashie	ole and non-negotiable instrumers' checks, promissory notes, and er to someone by signing or deliver	money orders.		
	☐ Yes. (	Give specific informa	ation about them Issuer name:				
21	_Examp	nent or pension accordes: Interests in IRA,		b), thrift savings accounts, or othe	er pension or profit-	sharing plan	s
	■ No □ Yes. I	List each account se T	parately. Type of account:	Institution name:			
22	Your sl		eposits you have made so that	at you may continue service or use lic utilities (electric, gas, water), te		companies,	or others
				Institution name or individual:			
23	Annuiti ■ No □ Yes		periodic payment of money to	o you, either for life or for a numbe	er of years)		
24	26 U.S.0	C. §§ 530(b)(1), 529A	A(b), and 529(b)(1).	fied ABLE program, or under a	•		m.
25	☐ Yes Trusts,		·	r than anything listed in line 1),		, ,	able for your benefit
	■ No □ Yes.	Give specific information	ation about them				
26			marks, trade secrets, and o names, websites, proceeds f	ther intellectual property from royalties and licensing agree	ments		
		Give specific information					
27	Examp ■ No			tive association holdings, liquor li	censes, profession	al licenses	
M	oney or p	property owed to yo	ou?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax ref	unds owed to you					
		Give specific informa	ation about them, including wl	nether you already filed the return	is and the tax years	<b>3</b>	
29	■ No			ort, child support, maintenance, d	divorce settlement,	property sett	lement

Official Form 106A/B Schedule A/B: Property page 4

Document Page 14 of 40 Case number (if known) Debtor 1 **Amanda Jo Carico** 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Nicholas Carrico **Pekin Insurance** Unknown Term Policy \$400,000 (Spouse) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$0.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00

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Schedule A/B: Property

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Case number (if known)

Document Debtor 1 **Amanda Jo Carico** 

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$200,000.00
56.	Part 2: Total vehicles, line 5	\$32,529.00		
57.	Part 3: Total personal and household items, line 15	\$950.00		
58.	Part 4: Total financial assets, line 36	\$0.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$33,479.00	Copy personal property total	\$33,479.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$233,479.00

Official Form 106A/B Schedule A/B: Property page 6 Case 18-08750 Doc 1 Filed 03/26/18 Entered 03/26/18 18:29:01 Desc Main

		Documen	L Fauc 10 01 40	
Fill in this infor	mation to identify your	case:		
Debtor 1	Amanda Jo Caric	0		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT C	PF ILLINOIS	
Case number				
(II KNOWN)				☐ Check if this is an amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property You	Claim as	Exempt
---------	--------------	--------------	----------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption	
485 LaSalle Drive Somonauk, IL 60552 La Salle County	\$200,000.00	•	\$51,946.00	735 ILCS 5/12-112	
Residence of the Debtor Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
485 LaSalle Drive Somonauk, IL 60552 La Salle County	\$200,000.00		\$15,000.00	735 ILCS 5/12-901	
Residence of the Debtor Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
2014 Chevy Cruze 81000 miles Location: 485 LaSalle Drive.	\$7,529.00		\$2,400.00	735 ILCS 5/12-1001(c)	
Somonauk IL 60552 Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit		
6 rooms of furniture and misc. Household goods	\$750.00	•	\$750.00	735 ILCS 5/12-1001(b)	
Location: 485 LaSalle Drive, Somonauk IL 60552 Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit		
clothing of an adult female Location: 485 LaSalle Drive,	\$200.00		\$200.00	735 ILCS 5/12-1001(a)	
Somonauk IL 60552 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		

Case 18-08750 Doc 1 Filed 03/26/18 Entered 03/26/18 18:29:01 Desc Main Document Page 17 of 40 Debtor 1 Amanda Jo Carico Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Pekin Insurance** 215 ILCS 5/238 Unknown Unknown Term Policy \$400,000 **Beneficiary: Nicholas Carrico** 100% of fair market value, up to (Spouse) any applicable statutory limit Line from Schedule A/B: 31.1 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

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Fill in this inform	mation to identify you	ır case:			
Debtor 1					
Debior	Amanda Jo Car	Middle Name Last Name		-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Ba	inkruptcy Court for the	NORTHERN DISTRICT OF ILLINOIS		_	
Case number(if known)				_	if this is an led filing
Official Forn	n 106D				
		Who Have Claims Secure	d by Propert	v	12/15
Be as complete and is needed, copy the number (if known).	d accurate as possible. e Additional Page, fill it	If two married people are filing together, both are e out, number the entries, and attach it to this form. C	qually responsible for su	upplying correct informa	tion. If more space
	have claims secured by	• • • •			
☐ No. Check	k this box and submit t	his form to the court with your other schedules.	You have nothing else t	to report on this form.	
Yes. Fill in	n all of the information	below.			
Part 1: List A	II Secured Claims				
for each claim. If m	nore than one creditor has	more than one secured claim, list the creditor separatel s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Bank of A	America	Describe the property that secures the claim:	\$147,404.00	\$200,000.00	\$0.00
Creditor's Nam	e	485 LaSalle Drive Somonauk, IL 60552 La Salle County Residence of the Debtor			
PO BOX 3 Tampa, F		As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street	t, City, State & Zip Code	☐ Unliquidated			
Who owes the de	ebt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only		car loan)			
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of t	the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this community de		Other (including a right to offset) First Mort	gage		
Date debt was inc	urred	Last 4 digits of account number			
2.2 PNC Banl	k	Describe the property that secures the claim:	\$10,957.00	\$7,529.00	\$3,428.00
Creditor's Nam		2014 Chevy Cruze 81000 miles Location: 485 LaSalle Drive, Somonauk IL 60552		<del></del>	<del></del>
	h, PA 15274	As of the date you file, the claim is: Check all that apply.			
	t, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mortgage or secar loan)	ecured		
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of t	the debtors and another	☐ Judgment lien from a lawsuit			
Check if this community de	laim relates to a	Other (including a right to offset) Lien on Ti	tle to Vehicle		
Date debt was inc	urred	Last 4 digits of account number			

Official Form 106D

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Debtor 1 Amanda Jo Carico			Case number (if know)			
	First Name Middle N	ame Last Name	_			
2.3	Suntrust Consumer Loans	Describe the property that secures	the claim:	\$26,839.56	\$25,000.00	\$1,839.56
,	Creditor's Name	2016 Chevy HD2500 36000 r Location: 485 LaSalle Drive Somonauk IL 60552				
	PO BOX 791144 Baltimore, MD 21279	As of the date you file, the claim is: apply.  Contingent	Check all that			
	Number, Street, City, State & Zip Code	Unliquidated				
Who	owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
_	ebtor 1 only ebtor 2 only	☐ An agreement you made (such as mortgage or secured car loan)				
	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
A	t least one of the debtors and another	☐ Judgment lien from a lawsuit				
	heck if this claim relates to a community debt	Other (including a right to offset)	Lien on Tit	tle to Vehicle		
Date	debt was incurred	Last 4 digits of account num	ber			
Ad	d the dollar value of your entries in C	column A on this page. Write that num	ber here:	\$185,200.5	i6	
If t	•	the dollar value totals from all pages		\$185,200.5		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in this	information to identify your	case:			
Debtor 1	Amanda Jo Caric	0			
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Medalla Massa	LastName		
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Casa numh	hor				
Case numb				пс	heck if this is an
				_	mended filing
				<u> </u>	
	Form 106E/F				
Schedu	ile E/F: Creditors W	ho Have Unsecure	ed Claims		12/15
Schedule G: Schedule D: left. Attach tl	ry contracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Sec he Continuation Page to this pag ase number (if known).	ired Leases (Official Form 106G ured by Property. If more space	i). Do not include any creditors w is needed, copy the Part you ne	rith partially secured claims ed, fill it out, number the ent	that are listed in tries in the boxes on the
Part 1:	List All of Your PRIORITY Un	secured Claims			
1. Do any	creditors have priority unsecure	d claims against you?			
No. 0	Go to Part 2.				
Yes.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any	creditors have nonpriority unsec	cured claims against you?			
□ No. `	You have nothing to report in this pa	art. Submit this form to the court w	vith your other schedules.		
Yes.					
unsecur	of your nonpriority unsecured classed claim, list the creditor separately a creditor holds a particular claim, li	y for each claim. For each claim lis	sted, identify what type of claim it is	. Do not list claims already inc	luded in Part 1. If more
					Total claim
4.1 <b>Ba</b>	ank of America	Last 4 digits of a	account number		\$7,141.45
	npriority Creditor's Name	<del></del>			· · · · · · · · · · · · · · · · · · ·
	D BOX 660576	When was the d	ebt incurred?		-
	allas, TX 75266-0576 mber Street City State Zlp Code	As of the date ve	ou file, the claim is: Check all tha	t apply	
	no incurred the debt? Check one.	·	•		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and and	•	IORITY unsecured claim:		
<del></del>	Check if this claim is for a comm				
del			rising out of a separation agreemer	nt or divorce that you did not	
ls t	the claim subject to offset?	report as priority		,	
	No	☐ Debts to pens	sion or profit-sharing plans, and oth	er similar debts	
	Yes	Other. Specific	Business supplies		

Official Form 106 E/F

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Debtor 1 Amanda Jo Carico		Case number (if know)			
4.2	Bank Of America	Last 4 digits of account number	\$7,526.00		
	Nonpriority Creditor's Name Po Box 17054	When was the debt incurred?			
	Wilmington, DE 19850  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Business Supplies			
4.3	Capital One	Last 4 digits of account number	\$2,440.00		
	Nonpriority Creditor's Name PO BOX 6492	When was the debt incurred?			
	Carol Stream, IL 60197-6492	When was the debt incurred:			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Credit card purchases			
4.4	Chase	Last 4 digits of account number	\$6,900.00		
	Nonpriority Creditor's Name PO BOX 1423	When was the debt incurred?			
	Charlotte, NC 28201  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	The of the date year me, the dammer of look an anat apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Credit card purchases			

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Amanda Jo Carico		Case number (if know)			
4.5	Citi cards Nonpriority Creditor's Name	Last 4 digits of account number	\$1,510.00		
	PO BOX 78045 Phoenix, AZ 85062	When was the debt incurred?			
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Credit card purchases			
4.6	Deborah Farr	Last 4 digits of account number	\$102,585.00		
	Nonpriority Creditor's Name 485 LaSalle Street	When was the debt incurred?			
	Somonauk, IL 60552  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •			
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Business loan			
4.7	First Secure Bank Trust # 12-944	Last 4 digits of account number	\$40,000.00		
	Nonpriority Creditor's Name c/o Cambridge Management/ B.	When was the debt incurred?			
	Oswald 15941 Harlem Ave., ste 108 Tinley Park, IL 60477				
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	Пол			
	•	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	☐ Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Guaranty of Business lease for Couture Tan, Inc.			

Official Form 106 E/F

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Amanda Jo Carico	Case number (if know)				
GM Card / Capital One	Last 4 digits of account number	\$8,100.0			
Nonpriority Creditor's Name PO BOX 71087	When was the debt incurred?				
Charlotte. NC 28272	when was the debt incurred?				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Credit card purchases				

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 176,202.45
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 176,202.45

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this info	rmation to identify your	case:		
Debtor 1	Amanda Jo Cario	:0		
	First Name	Middle Name	Last Name	<del></del>
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 First Secure Bank Trust # 12-944
c/o Cambridge Management/ B. Oswald
15941 Harlem Ave., ste 108
Tinley Park, IL 60477

State what the contract or lease is for
lease on Business premises for Couture Tan
Premises abandond by Debtor

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Fill in th	is information to identify your	case:			
Debtor 1	Amanda Jo Caric	0			
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nu	mber				
(if known)				☐ Check if this is an amended filing	
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors		12/15	5
Decople a fill it out, your nam  1. D  N Y 2. W Arize N Y 3. In C in lii Forr	re filing together, both are equi- and number the entries in the ne and case number (if known) o you have any codebtors? (If y o es lithin the last 8 years, have you ona, California, Idaho, Louisiana, o. Go to line 3. es. Did your spouse, former spoul olumn 1, list all of your codebtine 2 again as a codebtor only if	ally responsible for supplicates on the left. Attach. Answer every question you are filing a joint case, of lived in a community provided in a communi	operty state or territory? erto Rico, Texas, Washing with you at the time?  spouse as a codebtor if tor or cosigner. Make su	? (Community property states and territories include	wn cial
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the deb Check all schedules that apply:	ot
3.1	Couture Tan, Inc. 485 LaSalle Drive Somonauk, IL 60552			☐ Schedule D, line ■ Schedule E/F, line4.6 ☐ Schedule G Deborah Farr	
3.2	Nicholas Lee Carico 485 LaSalle Drive Somonauk, IL 60552			■ Schedule D, line □ Schedule E/F, line □ Schedule G PNC Bank	
3.3	Nicholas Lee Carico 485 LaSalle Drive Somonauk, IL 60552			■ Schedule D, line 2.1 □ Schedule E/F, line 5. □ Schedule G 5. Bank of America	

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Debtor 1 Amanda Jo Carico		Case number (if known)			
	Additional Page to List More Codebtors				
-	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:			
3.4	Nicholas Lee Carico 485 LaSalle Drive Somonauk, IL 60552	■ Schedule D, line □ Schedule E/F, line □ Schedule G Suntrust Consumer Loans			

Schedule H: Your Codebtors

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Fill	in this information to identify your ca	ase:								
Del	otor 1 Amanda Jo	Carico			_					
_	otor 2 nuse, if filing)				_					
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_					
	se number nown)		-			□ А	k if this is: n amende	d filing		
_	#: aial Farra 400l								g postpetition ollowing date:	chapter
0	fficial Form 106I					M	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  **Describe Employment**	are married and not filing wi	ng jointly, and your sith you, do not include	spouse i de inforr	s liv natio	ing with on about	you, inclu your spo	ude inforr ouse. If m	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	iling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Employed			
	information about additional employers.	. ,	☐ Not employed				■ Not employed			
	. ,	Occupation	Office Manager							
	Include part-time, seasonal, or self-employed work.	Employer's name	Holmgren Electi	ric						
	Occupation may include student or homemaker, if it applies.	Employer's address	609 Thryselious Geneva, IL 6013							
		How long employed t	here? 4.5 year	rs			_			
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	port for	any I	line, write	\$0 in the	space. In	clude your nor	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	mplo	oyers for	that perso	n on the li	nes below. If y	ou need
						For Deb	otor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,	733.33	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	1,73	33.33	\$	0.00	

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Debt	or 1	Amanda Jo Carico	_	C	Case number (if kn	own)			
	Car	vy line 4 hore	1		For Debtor 1	22	non	Debtor 2 or a-filing spouse	
	Cop	by line 4 here	4.		\$ 1,733	.33	\$	0.00	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 262	.60	\$	0.00	<u> </u>
	5b.	Mandatory contributions for retirement plans	5b			.00	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	50			.00	\$	0.00	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d 5e			.00	\$ \$	0.00 0.00	_
	5f.	Domestic support obligations	5f.		·	.00	\$	0.00	_
	5g.	Union dues	5g			.00	\$	0.00	_
	5h.	Other deductions. Specify:	-		·	.00	· · ·	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.		\$ 262	.60	\$	0.00	_ 
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 1,470		\$	0.00	_
8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					· <u>—</u>		_
		monthly net income.	8a	a.	\$ 0	.00	\$	0.00	
	8b.	Interest and dividends	8b	).		.00	\$	0.00	<u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	2.	\$ 0	.00	\$	0.00	_
	8d.	Unemployment compensation	80			.00	\$	832.00	_
	8e.	Social Security	8e		·	.00	\$	0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	:	\$ 0	.00	\$	0.00	_
	8g.	Pension or retirement income	89	<b>J</b> .	\$ 0	.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h	1.+	\$0	.00	+ \$	0.00	<u>_</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S0	.00	\$	832.0	0
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1,470.73	+ \$		332.00 = \$	2,302.73
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-		-	
11.	Incl othe Do	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					Schedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies				,		. 12. \$	2,302.73
10	D	wou expect on increase or decrease within the year often year file this famous	2					month	ly income
13.	<b>■</b>	you expect an increase or decrease within the year after you file this form  No.  Yes. Explain:	r						

Fill	in this information to identify your case:				
Deb	otor 1 Amanda Jo Carico		Ch	eck if this is:	
Б.					•
	ouse, if filing)				owing postpetition chapter f the following date:
Lini	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING	nie		MM / DD / YYYY	
UIII	ted States Bankrupicy Count for the.	513		WIWI / DD / TTTT	
	se number nown)				
Ĺ	,				
$\circ$	fficial Form 106J				
	chedule J: Your Expenses				12/15
	as complete and accurate as possible. If two married people are	e filing together, bot	th are ed	ually responsible f	
	ormation. If more space is needed, attach another sheet to this f mber (if known). Answer every question.	orm. On the top of a	any addi	tional pages, write	your name and case
Pai	t 1: Describe Your Household Is this a joint case?				
	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate Househ	old of De	ebtor 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2.    Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		8	Yes
		Daughter		11	□ No ■ Yes
		Daugittei			_ ■ Yes □ No
					☐ Yes
					□ No
2	De verre evenence include				Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
Pai					
exp	timate your expenses as of your bankruptcy filing date unless your bankruptcy is filed. If this is a supploblicable date.				
Inc	lude expenses paid for with non-cash government assistance if	you know			
	value of such assistance and have included it on Schedule I: Yoficial Form 106I.)	our Income		Your ex	penses
(01	ncial Form 100i.)				
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4.	\$	1,466.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	· -	0.00
	4b. Property, homeowner's, or renter's insurance		4b.		0.00
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. 4d.		0.00 0.00
5.	Additional mortgage payments for your residence, such as hor	ne equity loans	5.	·	0.00

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Deb	tor 1	Amanda	Jo Carico	Case num	nber (if known)	
_						
6.	Utilit		had advalant	0	•	272.22
	6a.	-	heat, natural gas	6a.	·	250.00
	6b.		ver, garbage collection	6b.	· .	75.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d.	Other. Spe	ecify:	6d.	\$	0.00
7.	Food	d and house	ekeeping supplies	7.	\$	550.00
8.	Child	dcare and c	hildren's education costs	8.	\$	0.00
9.	Clotl	hing. laund	ry, and dry cleaning	9.	\$	0.00
10		-	roducts and services	10.	\$	0.00
			ntal expenses	11.	·	0.00
			Include gas, maintenance, bus or train fare.		Ψ	0.00
12.			ar payments.	12.	\$	150.00
13			clubs, recreation, newspapers, magazines, and books	13.	· · ·	0.00
			ributions and religious donations	14.	· -	0.00
			ibutions and rengious donations	14.	Φ	0.00
15.		rance.	auranae daduated from your nay ar included in lines 4 or 20			
			surance deducted from your pay or included in lines 4 or 20.	150	æ	404.74
		Life insura		15a.	· .	101.74
		Health ins		15b.		0.00
	15c.	Vehicle ins	surance	15c.	· .	100.00
	15d.	Other insu	rance. Specify:	15d.	\$	0.00
16.	Taxe	s. Do not in	clude taxes deducted from your pay or included in lines 4 or 20.			
	Spec		, , ,	16.	\$	0.00
17.	Insta	illment or le	ease payments:			
			ents for Vehicle 1	17a.	\$	317.00
			ents for Vehicle 2	17b.	\$	399.00
		Other. Spe		17c.	· ·	0.00
		Other. Spe		17d. 17d.	· .	_
40		•	·		Φ	0.00
18.			of alimony, maintenance, and support that you did not report as	18.	\$	0.00
10			your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	· · ·	
19.			s you make to support others who do not live with you.	40	\$	0.00
	Spec			19.		
20.			erty expenses not included in lines 4 or 5 of this form or on Sche			
			on other property	20a.		0.00
	20b.	Real estat	e taxes	20b.	\$	0.00
	20c.	Property, I	nomeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21		r: Specify:			+\$	0.00
۷١.	Othic	opecity.			- Ψ	0.00
22.	Calc	ulate your i	nonthly expenses			
		Add lines 4	•		\$	3,608.74
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
		. ,			'	
	22C.	Add line 22	a and 22b. The result is your monthly expenses.		\$	3,608.74
23	Calc	ulate vour	monthly net income.			
_0.			12 (your combined monthly income) from Schedule I.	23a.	\$	2,302.73
		. ,	,		·	
	∠30.	copy your	monthly expenses from line 22c above.	23b.	-φ	3,608.74
	00-	C b. t 4	our monthly over an action value monthly in-			
	23C.		our monthly expenses from your monthly income.	23c.	\$	-1,306.01
		ine result	is your monthly net income.	236.	*	1,000.01
24	Dc :-	OII OVECE	un increase or decrease in your expenses within the year offer yo	u fila 4hi	form?	
<b>24</b> .			In increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect your			ase or decrease because of a
			terms of your mortgage?	mortgage	payment to more	ase of ucorease pecause of a
	_		como on your mongago.			
	■ N					
	☐ Y	es.	Explain here:			

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Fill in this info	rmation to identify your	case:			
Debtor 1	Amanda Jo Caric	0			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For	m 106Dec				
			D. I. ( I. O. I.	1 . 1	
Declara	tion About a	ın individual	<b>Debtor's Sch</b>	ieauies	12/15
obtaining mone		n connection with a bank			ent, concealing property, or or imprisonment for up to 20
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an attori	ney to help you fill out ban	nkruptcy forms?	
■ No					
☐ Yes.	Name of person				otcy Petition Preparer's Notice, and Signature (Official Form 119)
				Deciaration, an	a orginature (Ombiai i omi 119)
	alty of perjury, I declare re true and correct.	that I have read the sumi	mary and schedules filed v	with this declaration a	nd
X /s/ An	nanda Jo Carico		X		
	da Jo Carico		Signature of De	ebtor 2	

Signature of Debtor 1

Date March 26, 2018

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Fil	l in this infor	mation to identify you	r case:			
De	btor 1	Amanda Jo Cari	со			
De	btor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT C	F ILLINOIS		
Са	se number					
(if k	nown)					Check if this is an
						amended filing
Of	fficial Fo	orm 107				
			Affairs for Individ	luals Filing for B	ankruptcv	4/16
nun	ormation. If in the state of th	nore space is needed, n). Answer every que		this form. On the top of an		
Pa	rt 1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	ur current marital statu	s?			
	Marrie					
	☐ Not ma	arried				
2.	During the	last 3 years, have you	lived anywhere other than v	where you live now?		
	No					
	☐ Yes. Li	st all of the places you I	ived in the last 3 years. Do no	t include where you live now	1.	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> stat			ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev			
	No					
	☐ Yes. M	lake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Expla	ain the Sources of You	r Income			
4.	Fill in the to	tal amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	Il businesses, including part	time activities.	endar years?
	□ No					
	Yes. F	ill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		l of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$7,091.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Amanda Jo Carico		Case number (if known)						
	Dobtov 4		Debtor 2					
	Sources of income Check all that apply.	Sources of income Gross income		Gross income (before deductions and exclusions)				
	■ Wages, commissions, bonuses, tips	\$7,091.00	☐ Wages, commissions, bonuses, tips					
	☐ Operating a business		☐ Operating a business					
For last calendar year: (January 1 to December 31, 2017)	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips					
	Operating a business		☐ Operating a business					
	■ Wages, commissions, bonuses, tips	\$21,935.00	☐ Wages, commissions, bonuses, tips					
	☐ Operating a business		☐ Operating a business					
For the calendar year before that: (January 1 to December 31, 2016)	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips					
	Operating a business		☐ Operating a business					
	■ Wages, commissions, bonuses, tips	\$19,815.00	☐ Wages, commissions, bonuses, tips					
	☐ Operating a business		☐ Operating a business					
5. Did you receive any other income Include income regardless of whe and other public benefit payment winnings. If you are filing a joint of List each source and the gross in No Yes. Fill in the details.	ether that income is taxable. Exas; pensions; rental income; interase and you have income that y come from each source separate  Debtor 1  Sources of income	amples of other income are a est; dividends; money collector received together, list it could be a compared to the collector of the collector	limony; child support; Social Sted from lawsuits; royalties; aronly once under Debtor 1.  hat you listed in line 4.  Debtor 2 Sources of income	Gross income				
	Describe below.	each source (before deductions and exclusions)	Describe below.	and exclusions)				
Part 3: List Certain Payments Yo	ou Made Before You Filed for I	Bankruptcy						
6. Are either Debtor 1's or Debtor	2's debts primarily consumer	debts?						
■ No. <b>Neither Debtor 1 nor</b> individual primarily for	Debtor 2 has primarily consurations a personal, family, or household	imer debts. Consumer debts d purpose."	s are defined in 11 U.S.C. § 10	11(8) as "incurred by an				
_ ~ ,	efore you filed for bankruptcy, die	d you pay any creditor a tota	I of \$6,425* or more?					
No. Go to line								
paid that	veach creditor to whom you paid creditor. Do not include payment le payments to an attorney for the	its for domestic support oblig						

not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

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Debtor 1 Amanda Jo Carico			Carico	Case number (if known)				
	☐ Yes.			ve primarily consumer dek d for bankruptcy, did you pa		al of \$600 or more?	,	
		□ No.	Go to line 7.					
		□ Yes	List below each credit	domestic support obligations	or to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not domestic support obligations, such as child support and alimony. Also, do not include payments to uptcy case.			
	Creditor'	s Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					I partner; corporations gent, including one for		
	■ No □ Yes.	List all paym	ents to an insider.					
	Insider's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
<ul> <li>Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit insider?</li> <li>Include payments on debts guaranteed or cosigned by an insider.</li> </ul>				ebt that benefited an				
	☐ Yes.	List all paym	ents to an insider					
	Insider's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
<b>Ра</b> і 9.	Within 1 y	rear before y	you filed for bankrupt	ns, and Foreclosures  cy, were you a party in any cases, small claims actions				
	■ No □ Yes.	Fill in the de	tails.					
	Case title			Nature of the case	Court or agency		Status of th	e case
<ul> <li>Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or Check all that apply and fill in the details below.</li> <li>No. Go to line 11.</li> </ul>			l, seized, or levied?					
	☐ Yes. Fill in the information below.							
	Creditor	Name and A	Address	Describe the Property		Date		Value of the property
				Explain what happened				1 11 3
11.	<ul> <li>11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>					mounts from your		
	Creditor	Name and A	Address	Describe the action the	creditor took	Date :	action was	Amount
12.			you filed for bankrupt iver, a custodian, or a	ccy, was any of your prope another official?	rty in the possess			fit of creditors, a
	■ No □ Yes							
Offic	ial Form 107		State	ment of Financial Affairs for In	ndividuals Filing for E	Bankruptcy		page <b>3</b>

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Det	otor 1 Amanda Jo Carico		Case number	er (if known)	
Par	t 5: List Certain Gifts and Contributions	ì			
13.	Within 2 years before you filed for bankru	ptcy, d	lid you give any gifts with a total value of more	than \$600 per person	?
	No				
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600	)	Describe the gifts	Dates you gave	Value
	per person		2000bo tilo gilto	the gifts	valuo
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru ■ No	ptcy, d	lid you give any gifts or contributions with a to	tal value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co				
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did you lose an	ything because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
		Descril	be any insurance coverage for the loss	Date of your	Value of property
			the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	loss	lost
Par	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p		d you or anyone else acting on your behalf pay	or transfer any prope	rty to anyone you
	Include any attorneys, bankruptcy petition pr	eparers	s, or credit counseling agencies for services requir	ed in your bankruptcy.	
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was	Amount of payment
	Email or website address Person Who Made the Payment, if Not Yo	ou		made	
	John S. Biallas, Attorney At Law 3N918 Sunrise lane St. Charles, IL 60174		Attorney Fees	3/2018	\$2,500.00
	jsb70@comcast.net				
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	itors o		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address		transferred	or transfer was made	payment

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Debtor 1 Amanda Jo Carico

Case number (if known)

	ransferred in the ordinary course of your busing nolude both outright transfers and transfers made						
	Person Who Received Transfer Address	Description and value property transferred	e of	Describe any property or payments received or debts paid in exchange	Date transfer was made		
	Person's relationship to you						
	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No						
	Yes. Fill in the details.	December and value	f. the manage	h, tuanafama d	Data Transfer was		
	Name of trust	Description and value	e of the proper	ty transferred	Date Transfer was made		
Part	8: List of Certain Financial Accounts, Instru	ments, Safe Deposit Bo	xes, and Stora	ge Units			
	Nithin 1 year before you filed for bankruptcy, w	vere any financial accou	nts or instrume	ents held in your name, or for you	ur benefit, closed,		
	sold, moved, or transferred? nclude checking, savings, money market, or of nouses, pension funds, cooperatives, associati	•		deposit; shares in banks, credit ι	unions, brokerage		
	No						
	Yes. Fill in the details.						
		,	pe of account strument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year	r hefore you filed for han	nkruntov anvis	afe denosit hox or other denosite	ory for securities		
	cash, or other valuables?	before you filed for bar	ikiupicy, ally s	are deposit box of other deposit	ory for securities,		
	_						
	No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access Address (Number, Street, State and ZIP Code)		scribe the contents	Do you still have it?		
22.	lave you stored property in a storage unit or p	lace other than your hor	ne within 1 yea	ar before you filed for bankruptcy	?		
	_						
	■ No						
	Yes. Fill in the details.				_		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had a to it? Address (Number, Street, State and ZIP Code)		scribe the contents	Do you still have it?		
Part	9: Identify Property You Hold or Control for	Someone Fise					
I GII	dentity Property Tou Hold of Control for	Someone Lise					
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or h for someone.					r, or hold in trust		
	No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property (Number, Street, City, State a Code)		scribe the property	Value		
Par	10: Give Details About Environmental Inform	ation					
	ne purpose of Part 10, the following definitions						
	Environmental law means any federal, state, or	local statute or regulation	on concerning	pollution, contamination, release	es of hazardous or		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

regulations controlling the cleanup of these substances, wastes, or material.

Debtor 1 Amanda Jo Carico

Case number (if known)

	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an emhazardous material, pollutant, contaminant		waste, hazardous substance, toxic	c substance,			
Rep	port all notices, releases, and proceedings the	hat you know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that	at you may be liable or potentially liable	under or in violation of an environ	mental law?			
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit o	f any release of hazardous material?					
	■ No						
	☐ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlements	s and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title	Court or agency	Nature of the case	Status of the			
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case			
Pai	rt 11: Give Details About Your Business or	Connections to Any Business					
27.	Within 4 years before you filed for bankrup	otcy, did you own a business or have an	y of the following connections to a	ny business?			
	☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	either full-time or part-time				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	■ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	□ No. None of the above applies. Go to Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.						
	Business Name	Describe the nature of the business	Employer Identification number				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.				
	,	·	Dates business existed				
	Couture Tan, Inc. c/o Amanda Carico	Tanning Salon	EIN: 38-3882197				
	485 LaSalle Drive Somonauk, IL 60552	Sean Herbrand TAC Services Inc 3217 CHARLEMAGNE LN	From-To				

**SAINT CHARLES, IL 60174-8613** 

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Debte	Amanda Jo Carico		Case number (if known)	
i I	nstitutions, creditors, or other parties.  No	. ,, , ,	ment to anyone about your business? Incl	ude all financial
	Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Part	12: Sign Below			
18 U.S	n bankruptcy case can result in fines u S.C. §§ 152, 1341, 1519, and 3571. manda Jo Carico anda Jo Carico	Signature of Debtor 2		
Sign	ature of Debtor 1			
Date	March 26, 2018	Date		
Did yo ■ No □ Ye		tement of Financial Affairs for Individ	uals Filing for Bankruptcy (Official Form 1	07)?
	ou pay or agree to pay someone who i	s not an attorney to help you fill out l	ankruptcy forms?	
■ No		ankruptcy Petition Preparer's Notice De	claration, and Signature (Official Form 119).	
		apic, . c roparor o rionoo, Bo		

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Fill in this inform	mation to identify your case:		
Debtor 1	Amanda Jo Carico		
Bootor 1	First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	ankruptcy Court for the: NORTHERN DIS	TRICT OF ILLINOIS	
Case number			☐ Check if this is an amended filing
Official Fo	urm 108		
		iduals Filing Under Chapt	ter 7
		<u> </u>	
If you are an indi	ividual filing under chapter 7, you must fi	ll out this form if:	
creditors have	e claims secured by your property, or		
	sed personal property and the lease has r		- 4 f - 4 d 4 i f 4 i d
	ever is earlier, unless the court extends th	you file your bankruptcy petition or by the date the time for cause. You must also send copies to t	
		oth are equally responsible for supplying correct	information. Both debtors must
sign an	nd date the form.		
	and accurate as possible. If more space is our name and case number (if known).	s needed, attach a separate sheet to this form. O	n the top of any additional pages,
	,		
Part 1: List Yo	our Creditors Who Have Secured Claims		
		D: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
information be Identify the cre	elow. editor and the property that is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's P	PNC Bank	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	
Description of	2014 Chevy Cruze 81000 miles	Retain the property and enter into a	Yes
property	Location: 485 LaSalle Drive,	Reaffirmation Agreement.  Retain the property and [explain]:	
securing debt:	Somonauk IL 60552	— Retain the property and [explain].	
Creditor's S	Suntrust Consumer Loans	☐ Surrender the property.	<b>-</b>
name:	difficultion Loans	☐ Retain the property and redeem it.	No
Description of		Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	Location: 485 LaSalle Drive,	☐ Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

Somonauk IL 60552

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

securing debt:

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De	btor 1	Amanda Jo	o Carico	Case number (if known)	
Les	ssor's na	ıme:	First Secure Bank Trust # 12	-944	■ No
					☐ Yes
	scription operty:		lease on Business premises Premises abandond by Debte		
Pa	rt 3: S	ign Below			
	•		y, I declare that I have indicated to an unexpired lease.	my intention about any property of my estate that se	cures a debt and any personal
Χ	/s/ An	nanda Jo C	Carico	X	
	Amar	nda Jo Cari	ico	Signature of Debtor 2	
	Signat	ture of Debto	r 1		